UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

PROCESSED

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OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC	USE ON	LY
Prefix		Serial
DAT	E RECEIV	VED

Name of Offering ([] check if this is Units	s an amendment a	nd name has ch	anged, and indica	ate change.) \$800,0	000 of LLC Preferred
Filing Under (Check box(es) that apply):	[] <u>Rule 504</u>	[] <u>Rule 505</u>	[X] <u>Rule 506</u>	[] Section 4(6)	[JULOE
Type of Filing: [X] New Filing [] Amendment			SECHI	RECEIVET
	A. BAS	IC IDENTIFICAT	TION DATA	SOF	±-2 2 2004
1. Enter the information requested	about the issuer	and the second	en e	anning the section of	192 - OB
Name of Issuer ([] check if this is IVS LLC	an amendment ar	nd name has cha	nged, and indica	te change.)	
Address of Executive Offices 13147 Middletown Industrial Bou (Number and Street, City, Sta	•		Number (Includii	(502) 254-0755 ng Area Code)	CO 3 (ССССТВОК), и по посто посто по ССССТВО СССТВО, 3 досумен во на на населенија до содинен на посто по СССТ
Address of Principal Business Ope Code) (if different from Executive C		and Street, City,	State, Zip Code)	Telephone Numb	per (Including Area
Brief Description of Business deve	loper and market	er of voting sys	tems	<mark>mangan kendulugan dan mendulugan dan dan dan beranggan dan dan penganan dibinah pengangan dan dan dan dan dan</mark>	nggan milikanta ng pang indonensia da kan na manang kenangkangganggangan da di interas ng pagan milika b
Type of Business Organization	and the state of t	na na vina na n	nde version to de secreta con comprese se de secreta de secreta de como con con con que se de secreta de consc An esta como todo secreta con comprese se de secreta de secreta de secreta de secreta de secreta de comprese d	garteraturkannan promoteratura erroren	and Charles and Albert and Albert and English and English and English and English and Albert and Al
[] corporation	[] limited parti	nership, already f	ormed	[x] other (please s	specify):
[] business trust	[] limited partr	nership, to be for	med lii	nited liability compa	ny
эл 199 он город хүч ород эмгээ 1996 он орон он о	and no section of the control of the	Mor	nth Year	тари и се и того е од венени во в вого од воје од 100 година вод од 100 година од 100 година од 100 година од	anne land na chuir ann a thuan agus leann ann a tha f ai mh e an tha tha a tha ann agus tha feach agus ag
Actual or Estimated Date of Incorporation or Organization of Incorporation or Organization	anization: (Enter t			eviation for State: K] Estimated (Y



GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

SEC 1972 Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[] Promoter [X] Ben Owi	-	X] Executive Officer	[X] Director []	General and/or Managing Partner	
Full Name (Last nan	ne first, if individual) No	guyen, Yung	·····································	MATERIA (SABA) DALASAR MATERIA SA	४४ वर्षा वर्षाः स्थानसम्बद्धाः सम्बद्धाः सम्बद्धाः स्थानसम्बद्धाः सम्बद्धाः स्थानसम्बद्धाः सम्बद्धाः सम्बद्धाः	HARM HARVESTER SHARE
Business or Resider Louisville, KY 4022	•	nd Street, City	y, State, Zip Coo	de) 13147 Middleto	own Industrial Boulevard,	***************************************
Check Box(es) that	Apply: [] Promoter [)	(] Beneficial (Owner [] Exec	utive Officer [] Dir	ector [] General and/or Managing Partner	***************************************
Full Name (Last nam	ne first, if individual) M	ontazeri, Ali	et la principale i soment destre sinue pour populer preside à l'Alfrageau paparea poe à 1491-le	-1 gas causade 7 (40) (10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	50 00 00 00 100 person reviews (***) (***) (hanges and hand *** ***) (hanges and discharge at 50 method (***) (***) (hanges at 50 method (***) (hanges at 50	1700.00 300100 1844100 300000
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Check Box(es) that	Apply: [] Promoter []	Beneficial Ov	wner [] Execut	ive Officer [X] Dir	ector [] General and/or Managing Partner	1044 244 244 244 244 244 244 244 244 244
Full Name (Last nan	ne first, if individual) Fa	ırhadi, Shahria	3	Service ou manage and description and an activate of the forest of the service of	моском продост стем помочения для стем на помочен на прости на прости на прости на прости на присти на прости на прости на присти на	Spec successors and evidenment
Business or Resider	nce Address (Number a	nd Street, City	y, State, Zip Cod	le) 11921 Creel Lo	odge Drive, Louisville, KY 402	223
Check Box(es) that	Apply: [] Promoter []	Beneficial Ov	wner [] Execut	ive Officer [X] Dir	ector [] General and/or Managing Partner	492 200000 7700000 1000000000
Full Name (Last nan	ne first, if individual) Mo	ountjoy, Micha	ıel			######################################
Business or Resider	ice Address (Number a	nd Street, City	y, State, Zip Cod	le) 2300 Waterfror	nt Plaza, Louisville, KY 40202	2
Check Box(es) that	Apply: [] Promoter []	Beneficial O	wner [] Execut	ive Officer [X] Dir	ector [] General and/or Managing Partner	ingeline men seletive
Full Name (Last nam	ne first, if individual) Mu	lloy, Timothy	M			and the second
Business or Resider	ce Address (Number a	nd Street, City	y, State, Zip Coo	le) 200 S. Fifth Str	eet, Louisville, KY 40202	20201021003020019999991
Check Box(es) that	Apply: [] Promoter []	Beneficial Ov	wner [] Execut	ive Officer [X] Dir	ector [] General and/or Managing Partner	#*************************************
Full Name (Last nam	ne first, if individual) Da	avis, Mike	ob addition of the all the all the company of the start in the company the company and the starts	<mark>elektrinis (och 1007/00/164), och ville elektrinis (och 1007/164), des sver och 1007/164 (och 1007/164), och 1007/164</mark>	н Эт Галан (заме в место то Эт 12, этом) А той Том (1804 По не на место на бай бай (1814 год не на место на на почет на	***************************************
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Business or Residence Address (Number and Street, City, State, Zip Code) Suite 200, 10401 Linn Station Road, Louisville, KY 40223 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.) **B. INFORMATION ABOUT OFFERING** Yes No 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?...... [X] 1 Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?..... \$40,000 Yes No 3. Does the offering permit joint ownership of a single unit?..... [X][] 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] All States [AL] [AZ] [AK] [AR] [CA] (COI [CT] [DE] [DC] [FL] [GA] [HI][IDI] [MD] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MA] [MI] [MN] [MS] [MO] INC1 IMTI [NE] INVI INHI [NJ] IMMI [NY] INDI IOH **IOKI** [OR] [PA] [RI] [WV] [WI] [WY] [PR] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] All States [AL] [CA] [CT] [DE] [DC] [FL] [GA] [ID] [AK] [AZ] [AR] [CO] [HI] [LA] [MD] [MA] [MN] [MO] [IL] [IN] [IA] [KS] [KY] [ME] IMI [MS] [MT] [NE] [NV] [NH] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [NJ] [RI] [VT] [VA] [WA] [WV] [W] [WY] [PR] [SC] [SD] [TN] [TX] [UT] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [] All States

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	Α	nswer als	so in App	endix, C	olumn 3,	if filing un	der ULO	Ξ.	_			
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Total		[]	\$15,000
Enter the difference between the aggregate offering price giv Question 1 and total expenses furnished in response to Part 0 ifference is the "adjusted gross proceeds to the issuer."	C - Question 4.a. This		\$785,000
Indicate below the amount of the adjusted gross proceeds to roposed to be used for each of the purposes shown. If the amout known, furnish an estimate and check the box to the left of the payments listed must equal the adjusted gross proceeds to esponse to Part C - Question 4.b above.	ount for any purpose is the estimate. The total of		
sponse to Fait C - Question 4.b above.		Payments to	
		Officers, Directors, & Affiliates	Payments To Others
Salaries and fees	••	[]\$	_[]\$
Purchase of real estate		[]\$	_[]\$
Purchase, rental or leasing and installation of machinery and equipment		[]\$	[]\$
Construction or leasing of plant buildings and facilities Acquisition of other businesses (including the value of		[]\$	_[]\$
securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		[]\$	_[]\$
Repayment of indebtedness		[]\$	_[]\$
Working capital		[]\$	
Other (specify):		[]\$	_[]\$
Column Totals Total Payments Listed (column totals added)	- - 	[]	[X] \$785,000 [] \$785,000
D. FEDERAL	SIGNATURE	. Service and the common c	AND THE STATE OF THE PROPERTY
ne issuer has duly caused this notice to be signed by the undeule 505, the following signature constitutes an undertaking by commission, upon written request of its staff, the information fur paragraph (b)(2) of Rule 502.	the issuer to furnish to th	e U.S. Securiti	es and Exchange
uer (Print or Type)	Signature Na	up.	Date - 0.7- 0.1-04
S LLC me of Signer (Print or Type)	Title of Signer (Print of	Type)	1-121 V
⁄ung Nguyen	President U	U	
ATTENT	ION	teritoria de la companio de la comp	
Intentional misstatements or omissions of fact constitu		tions. (See 18	U.S.C. 1001.)
E. STATE S	IGNATURE	or Ministerior I, sign an agree and contributed and segment extended to the contribute of the contributed and	editions sufficient designations, segreptions, contained and properties in the segrence of the
Is any party described in 17 CFR 230.262 presently subject to		on provisions o	fsuch Yes No
See Appendix Column			111.11

2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.

- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
IVS LLC	Yng Ngupe	_07-21-04
Name of Signer (Print or Type)	Title (Print or Type)	
Yung Nguyen	President	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

				T	***************************************	4			
	Intend to to non-acc investors i (Part B-lt	redited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	aı	Type of mount pur (Part	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
0.1		N 1 -		Number of Accredited		Number of Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
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